

Tennessee's Early Intervention System (TEIS)
System of Payments Policy
Effective July 1, 2012

I. Purpose

1. The Individuals with Disabilities Education Act (IDEA) Part C requires States to use Federal IDEA Part C funds as a payor of last resort and to identify and coordinate all available funding resources to pay for Part C services. Services must be provided at no cost unless a state has adopted a system of payments for services, which can include use of public benefits or insurance or private insurance. A system of payments is the state's written policy regarding the costs parents and children may incur for receipt of services and may include use of public or private insurance.
2. IDEA Part C requires that some services, including evaluation and assessment, development of the Individualized Family Service Plan (IFSP), and service coordination, be provided at no charge to parents and children. All additional early intervention services are subject to a state's system of payments.
3. Tennessee's Early Intervention System (TEIS) has established a system of payment policy to ensure that supports and services are provided in a way that will not create a financial hardship for parents and children. The purpose of the policy is to use other available primary payor sources without charging fees to parents and children services. The policy involves the use of private insurance, TennCare (Medicaid) and other government benefits to pay for services.
4. Families entering TEIS will be provided information about the policy and procedures that apply to their situation. Eligible parents and children will be responsible for following all system of payment requirements in accordance with the policy and procedures.

II. Definitions

1. *Core services* means functions that must be carried out at public expense, and for which no costs may be charged to parents and includes:
 - (a) Implementing child find requirements;
 - (b) Evaluation and assessment and the functions related to evaluation and assessment;
 - (c) Service coordination services;
 - (d) Administrative and coordinative activities related to—
 - (i) The development, review, and evaluation of IFSPs and interim IFSPs; and
 - (ii) Implementation of the procedural safeguards.
2. *Private insurance* means individual and group plans and programs administered through a commercial insurance company or self-insurance plan.
3. *Public benefits or insurance* means plans and programs administered through the Bureau of TennCare, any other Tennessee Medicaid programs or any other available government benefits or insurance.
4. *Services* means all early intervention services, as defined at 34 C.F.R. §303.13(b), other than core services. Services other than core services are subject to the system of payments.

III. Assurances

1. Parents will not be charged for the core services that a child is otherwise entitled to receive at no cost.

2. Parents with public insurance or benefits or private insurance will not be charged disproportionately more than families who do not have public insurance or benefits or private insurance.

IV. Participation

1. TEIS uses Part C funds to pay for costs of participation, such as deductibles or co-payments, which parents may incur through the use of public benefits or insurance or private insurance. It is the responsibility of the family to pay for insurance premiums.

V. Initial Evaluation

1. An initial evaluation is an evaluation to determine a child's initial eligibility for Part C services. An initial evaluation is a core service that must be carried out at public expense and for which no costs may be charged to parents.
2. TEIS is not required to make services available to a child unless a determination of initial eligibility is made.

VI. In-Network or Preferred Providers

1. Services must be placed with a "preferred" or an "in-network" provider for the particular insurance company.
2. Any exceptions must be approved in advance in writing by the Executive Director of TEIS with copy to the Central Reimbursement Office.
3. Service coordinators may contact the insurance company to determine whether a particular provider is a "preferred" or "in-network" provider.
4. If a service is not covered by the insurance company regardless of the provider, then any provider may be used. Documentation detailing the reason a service is not covered must be forwarded to the Central Reimbursement Office.
5. Lack of "preferred" or "in-network" providers cannot change the frequency or intensity of services in the child's IFSP.

VII. Private Insurance

1. Parents without private insurance must be informed of the availability of public benefits and insurance.

VIII. Payment for Services

1. All payments of Part C funds must be in accordance with the IFSP as it appears in Tennessee Early Intervention Data System (TEIDS).

IX. Interpreting

1. Interpreting for purposes of child find is limited to two (2) hours duration for each instance of intake, family assessment, eligibility evaluation and document preparation, unless it is clearly not feasible to do so.
2. For all purposes other than child find, interpreting is limited to two (2) hours duration for each instance of IFSP meetings and Transition Planning Conferences, unless it is clearly not feasible to do so.

3. Interpreting for ongoing IFSP service delivery is the responsibility of the early intervention service provider.

X. Interruption of Services

1. TEIS will reimburse a provider for only one documented “no show” per service, per child, per calendar month.
2. The choice of a parent to not receive services for any period of time is voluntary and all services that are refused, regardless of reason, will not be compensated or made available at a future date.
3. Parents must provide written proof to TEIS of any change in, or loss of, private insurance or public benefits, immediately upon parents’ receipt of notice of such change or loss.

XI. Termination of Services

1. Services end on the last day of the child’s second year of age. Funds will not be used for services beyond the end of the child’s second year of age.

XII. Assistive Technology

1. If a parent requests assistive technology and the IFSP team determines that it is not necessary to meet an outcome on the IFSP, or it is an item not on the list of eligible assistive technology services, the service coordinator must provide the family with a Prior Written Notice refusing the request.
2. A service coordinator may present a request, including all necessary information, for new or emerging assistive technology items that are not addressed on the list of eligible assistive technology for approval by the Executive Director of TEIS.
3. When it is anticipated that more than one thousand (\$1,000) dollars of TEIS funds will be paid toward any single assistive technology item, prior approval must be obtained via the Central Reimbursement Office.

XIII. Transportation

1. Transportation will be provided only when necessary to enable the child and family to receive early intervention services.
2. All necessary transportation for parents and children will be provided strictly via TEIS’ agreement with the Tennessee Department of Transportation.

XIV. Procedural Safeguards

1. Parents who wish to contest any action taken in accordance with this policy, may do one of the following:
 - (a) Participate in mediation;
 - (b) Request a due process hearing; or
 - (c) File a state complaint.